FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden

hours per response 16.00

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SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

Name of Offering(check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE PACIENTED
A. BASIC IDENTIFICATION DATA	1111
1. Enter the information requested about the issuer	2000
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Micell Technologies, Inc.	186 700
Address of Executive Offices (Number and Street, City, State, Zip Code) 7516 Precision Drive, Raleigh, North Carolina 27617	Telephone Number Hicluding Area Code) (919) 313-2402
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Systems management software for the virtual market.	PROCESSED
Type of Business Organization Corporation	ease specify): JUL 1 3 2007
Actual or Estimated Date of Incorporation or Organization: Month Year	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years: Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer □ Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Benvenuto, Arthur J. Business or Residence Address (Number and Street, City, State, Zip Code) 7516 Precision Drive, Raleigh, NC 27617 Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Langone, Kenneth G. Business or Residence Address (Number and Street, City, State, Zip Code) 375 Park Avenue, Suite 2205, New York, NY 10152 Beneficial Owner Director Check Box(es) that Apply: Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Cox, Jr., Archibald Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sextant Group, Inc. - 60 High Oaks Road, Watchung, NJ 07069 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Noble, Ph.D, Stewart Business or Residence Address (Number and Street, City, State, Zip Code) 7516 Precision Drive, Raleigh, NC 27617 Executive Officer Beneficial Owner Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Dresner, David Business or Residence Address (Number and Street, City, State, Zip Code) 7516 Precision Drive, Raleigh, NC 27617 Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) McClain, James Business or Residence Address (Number and Street, City. State, Zip Code) 7516 Precision Drive, Raleigh, NC 27617 Beneficial Owner Executive Officer Promoter Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Inversed Catalyst Fund, L.P. Business or Residence Address (Number and Street, City. State, Zip Code) 375 Park Avenue, Suite 2205, New York, NY 10152

A. BASIC IDENTIFICATION DATA

<u>-</u>	the issuer, if the is	suer has been organized v	-	10% or more of	a class	of equity securities of the issuer
		f corporate issuers and of of partnership issuers.	corporate general and man	aging partners of	partne	rship issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, it General Electric Pension						
Business or Residence Addr c/o GE Asset Manageme						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			······································
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					
Business or Residence Addr	ess (Number and	Street, City. State, Zip Co	ode)			<u> </u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)	,				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)	<u> </u>	·	<u> </u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					
Business or Residence Addr	ress (Number and	Street, City, State, Zip Co	ode)			

1.	Has the issu												
1.	Has the issu									Yes	No		
									\boxtimes				
2	Answer also in Appendix, Column 2, if filing under ULOE.								e NI/A				
2.	2. What is the minimum investment that will be accepted from any individual?								\$ N/A Yes	No			
 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 													
	Name (Last												
Busi	iness or Resid	dence Ad	ldress (Nui	mber and S	treet, City,	State, Zip C	Code)						
Nam	ne of Associa	ted Brok	er or Deale	er									
State	es in Which F	Person Li	isted Has S	Solicited or	Intends to	Solicit Purc	hasers						
	(Check "A	All States	s" or check	individual	States)							🗆 A	All States
[[[IL I	N N IE IC name firs	AZ IA NV SD st. if indivi	AR KS NH TN idual)	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN DK	MS OR WY	MO PA PR
Bus	iness or Resid	dence Ad	dress (Nu	mber and S	itreet, City,	State, Zip C	Code)						·
Nam	ne of Associa	ited Brok	er or Deale	er		 _							
State	es in Which f	Person Li	isted Has S	Solicited or	Intends to	Solicit Purc	hasers	-,,	_				
	(Check "A	All States	s" or check	individual	States)							🗆 🗸	All States
! [[IL I	N NE SC name firs	AZ IA NV SD st, if indivi	KS NH TN idual)	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN DK WI	MS OR WY	MO PA PR
Bus	iness or Resid	dence Ac	idress (Nu	mber and S	Street, City,	State, Zip C	Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								🗆 /	All States				
	AL A IL I MT N		IA VV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt\$	0	\$	0
	Equity\$	7,999,999.70	\$	7,054,996.33
	Common Preferred			
	Convertible Securities (including warrants)\$	0	\$	0
	Partnership Interests\$	0	\$	0
	Other (Specify)	0	\$	0
	Total\$	7,999,999.70	\$	7,054,996.33
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate Dollar Amount
		Investors		of Purchases
	Accredited Investors	9	•	7,054,996.33
	Non-accredited Investors			0
	Total (for filings under Rule 504 only)	0	9	0
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			Dollar Amount
	Type of Offering	Security		Sold
	Rule 505		,	5
	Regulation A		9	5
	Rule 504			
	Total			<u></u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-		
	Transfer Agent's Fees		\$	_
	Printing and Engraving Costs		\$	
	Legal Fees	🛛	\$	25,000.00
	Accounting Fees		\$	
	Engineering Fees			
	Sales Commissions (specify finders' fees separately)			
	Other Expenses (identify)		\$	
	Total		\$	25,000.00

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	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND USE O	<u> </u>	COCEED	<u> </u>	
	b. Enter the difference between the aggregate offetotal expenses furnished in response to Part C – proceeds to the issuer."	- Question 4.a. This difference is the "adjusted ;	gross		\$	7,974,999.70
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The tot proceeds to the issuer set forth in response to Pa	any purpose is not known, furnish an estimate al of the payments listed must equal the adjusted	and	j	·	
				Paymer Offic Directo Affilia	ers, rs, &	Payments to Others
	Salaries and fees		🗆	\$	🗆 s	
	Purchase of real estate	•••••	🗀	\$		i
	Purchase, rental or leasing and installation of m					
	and equipment			\$	🗆 \$	
	Construction or leasing of plant buildings and fa	cilities	🔲	\$	🗆 s	
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	sets or securities of another		•	П	
	Repayment of indebtedness			\$ <u></u>	s	· · · · · · · · · · · · · · · · · · ·
	Working capital					
	Other (specify):					
		<u> </u>				
				\$	🗆 s	
	Column Totals		🗀	\$	0 ⊠ s	7,974,999.70
	Total Payments Listed (column totals added)			•	⊠ \$	7,974,999.70
		D. FEDERAL SIGNATURE				"
sig	e issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accre	irnish to the U.S. Securities and Exchange Comm	issic	n, upon		
lss	uer (Print or Type)	Signature	Da	ite		
Mi	cell Technologies, Inc.	() () wo	Ju	ly 5, 2	007	
	me of Signer (Print or Type)	Title of Signer (Print or Type)			- ·	
Ar	thur J. Benvenuto	Chief Executive Officer				

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)